

**Louisiana Department of Transportation and Development**

**FORM L-1  
PROPOSER'S ORGANIZATION INFORMATION**

|   |  |                               |   |
|---|--|-------------------------------|---|
| <b>PROPOSER</b>   |  |                               |   |
| Name of Entity:<br>Address:                               |  |                               |   |
| Contact Name:   |  | Title:                        |   |
| Telephone Number:   |  | Facsimile Number:             | E-mail:   |
| <b>LOCAL / REGIONAL CONTACT (if different from above)</b> |  |                               |   |
| Name:<br>Address:   |  |                               |   |
| Telephone Number:   |  | Facsimile Number:             | E-mail:   |
| <b>NAME(S) OF PROPOSER ENTITY(IES)</b>                    |  |                               |   |
| <b>Company Name</b>                                       | <b>Address and Telephone and Facsimile Numbers</b> | <b>State of Incorporation</b> | <b>Lead Participant (include percent)</b><br><u>Yes</u> <u>No</u> |
| <b>Principal Participant(s)</b>                           |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |
| <b>Designer</b>   |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |
| <b>Quality Control Engineer</b>                           |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |
| <b>Other Firm(s)</b>                                      |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |
|   |  |                               |   |